

**State:** District of Columbia **First Filing Company:** National Casualty Company, ...  
**TOI/Sub-TOI:** 09.0 Inland Marine/09.0005 Other Commercial Inland Marine  
**Product Name:** Commercial Inland Marine  
**Project Name/Number:** CM 06380/CM DC06380CCF01

## Filing at a Glance

Companies: National Casualty Company  
Scottsdale Indemnity Company

Product Name: Commercial Inland Marine

State: District of Columbia

TOI: 09.0 Inland Marine

Sub-TOI: 09.0005 Other Commercial Inland Marine

Filing Type: Form

Date Submitted: 05/04/2018

SERFF Tr Num: SCTT-131488743

SERFF Status: Closed-APPROVED

State Tr Num:

State Status:

Co Tr Num: CM DC06380CCF01

Effective Date: On Approval

Requested (New):

Effective Date: On Approval

Requested (Renewal):

Author(s): Dawn Weirich

Reviewer(s): Carmen Belen (primary)

Disposition Date: 05/08/2018

Disposition Status: APPROVED

Effective Date (New): 05/08/2018

Effective Date (Renewal): 05/08/2018

**State:** District of Columbia  
**TOI/Sub-TOI:** 09.0 Inland Marine/09.0005 Other Commercial Inland Marine  
**Product Name:** Commercial Inland Marine  
**Project Name/Number:** CM 06380/CM DC06380CCF01

**First Filing Company:** National Casualty Company, ...

## General Information

Project Name: CM 06380

Project Number: CM DC06380CCF01

Reference Organization:

Reference Title:

Filing Status Changed: 05/08/2018

State Status Changed:

Created By: Dawn Weirich

Corresponding Filing Tracking Number:

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

Submitted By: Dawn Weirich

Filing Description:

National Casualty Company and Scottsdale Indemnity Company are submitting a revised form for the currently filed Commercial Inland Marine program. We request an effective date concurrent with your Department's approval.

Please Find the Following:

IM-18 (3-18) - Theft Exclusion Endorsement - Replaces edition (11-11)

IMI-18 (3-18) - Theft Exclusion Endorsement - Replaces edition (3-96)

## Company and Contact

### Filing Contact Information

Dawn Weirich, Filings Analyst II

PO Box 4110

Scottsdale, AZ 85261

weiricd@scottsdaleins.com

800-423-7675 [Phone] 3109 [Ext]

### Filing Company Information

National Casualty Company

PO Box 4110

Scottsdale, AZ 85261

(800) 423-7675 ext. [Phone]

CoCode: 11991

Group Code: 140

Group Name: Nationwide

FEIN Number: 38-0865250

State of Domicile: Ohio

Company Type:

State ID Number:

Scottsdale Indemnity Company

PO Box 4110

Scottsdale, AZ 85261

(800) 423-7675 ext. [Phone]

CoCode: 15580

Group Code: 140

Group Name: Nationwide

FEIN Number: 31-1117969

State of Domicile: Ohio

Company Type:

State ID Number:

## Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

<b>SERFF Tracking #:</b>	SCTT-131488743	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	CM DC06380CCF01
<b>State:</b>	District of Columbia	<b>First Filing Company:</b>	National Casualty Company, ...		
<b>TOI/Sub-TOI:</b>	09.0 Inland Marine/09.0005 Other Commercial Inland Marine				
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	Carmen Belen	05/08/2018	05/08/2018

<b>State:</b>	District of Columbia	<b>First Filing Company:</b>	National Casualty Company, ...
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## Disposition

Disposition Date: 05/08/2018  
Effective Date (New): 05/08/2018  
Effective Date (Renewal): 05/08/2018  
Status: APPROVED

Comment:

Rate data does NOT apply to filing.

### Overall Rate Information for Multiple Company Filings

<b>Overall Percentage Rate Indicated For This Filing</b>	0.000%
<b>Overall Percentage Rate Impact For This Filing</b>	0.000%
<b>Effect of Rate Filing-Written Premium Change For This Program</b>	\$0
<b>Effect of Rate Filing - Number of Policyholders Affected</b>	0

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Readability Certificate	APPROVED	Yes
Supporting Document	Copy of Trust Agreement	APPROVED	Yes
Supporting Document	Expedited SERFF Filing Transmittal Form	APPROVED	Yes
Supporting Document	Consulting Authorization	APPROVED	Yes
Form	IM-18	APPROVED	Yes
Form	IMI-18	APPROVED	Yes
Rate	NCC Manual Pages	RE-FILE UNDER RATES	Yes
Rate	SIN Manual Pages	RE-FILE UNDER RATES	Yes

<b>State:</b>	District of Columbia	<b>First Filing Company:</b>	National Casualty Company, ...
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## Form Schedule

Item No.	Schedule Item Status	Form Name	Form Number	Edition Date	Form Type	Form Action	Action Specific Data		Readability Score	Attachments
1	APPROVED 05/08/2018	IM-18	THEFT EXCLUSIO N ENDORSE MENT	3-18	END	Replaced	Previous Filing Number:			IM-18 (3-18).pdf, IM-18 (comp).pdf
							Replaced Form Number:	IM-18 (11-11)		
2	APPROVED 05/08/2018	IMI-18	THEFT EXCLUSIO N ENDORSE MENT	3-18	END	Replaced	Previous Filing Number:			IMI-18 (3-18).pdf, IMI-18 (comp).pdf
							Replaced Form Number:	IMI-18 (3-96)		

### Form Type Legend:

<b>ABE</b>	Application/Binder/Enrollment	<b>ADV</b>	Advertising
<b>BND</b>	Bond	<b>CER</b>	Certificate
<b>CNR</b>	Canc/NonRen Notice	<b>DEC</b>	Declarations/Schedule
<b>DSC</b>	Disclosure/Notice	<b>END</b>	Endorsement/Amendment/Conditions
<b>ERS</b>	Election/Rejection/Supplemental Applications	<b>OTH</b>	Other

ATTACHED TO AND FORMING A PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE DATE (12:01 A.M. STANDARD TIME)	NAMED INSURED	AGENT NO.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## **THEFT EXCLUSION ENDORSEMENT**

This endorsement modifies insurance provided under the following:

### **COMMERCIAL INLAND MARINE**

The following exclusion is added to the policy:

This insurance does not apply to:

#### **Theft**

We do not pay for loss or damage caused by or resulting from theft.

\_\_\_\_\_  
AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
DATE

ATTACHED TO AND FORMING A PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE DATE (12:01 A.M. STANDARD TIME)	NAMED INSURED	AGENT NO.

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\_\_\_\_\_  
AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
DATE

# Scottsdale Indemnity Company

**ENDORSEMENT  
NO. \_\_\_\_\_**

ATTACHED TO AND FORMING A PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE DATE (12:01 A.M. STANDARD TIME)	NAMED INSURED	AGENT NO.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

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This insurance does not apply to:

#### **Theft**

We do not pay for loss or damage caused by or resulting from theft.

\_\_\_\_\_  
AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
DATE



~~This endorsement changes the Inland Marine Coverage~~  
~~—CHANGES THE POLICY. PLEASE READ THIS! CAREFULLY.—~~

This endorsement modifies insurance provided under the following:

The following exclusion is added to ~~PERILS EXCLUDED~~the policy:

## Theft—

\_\_\_\_\_  
AUTHORIZED REPRESENTATIVE                      DATE

AUTHORIZED REPRESENTATIVE \_\_\_\_\_ DATE

IMI-18 (3-96)

<b>SERFF Tracking #:</b>	SCTT-131488743	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	CM DC06380CCF01
<b>State:</b>	District of Columbia	<b>First Filing Company:</b>	National Casualty Company, ...		
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## Rate Information

Rate data does NOT apply to filing.

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<b>TOI/Sub-TOI:</b>	09.0 Inland Marine/09.0005 Other Commercial Inland Marine		
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## Rate/Rule Schedule

Item No.	Schedule Item Status	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Attachments
1	RE-FILE UNDER RATES 05/08/2018	NCC Manual Pages		Withdrawn		
2	RE-FILE UNDER RATES 05/08/2018	SIN Manual Pages		Withdrawn		

<b>State:</b>	District of Columbia	<b>First Filing Company:</b>	National Casualty Company, ...
<b>TOI/Sub-TOI:</b>	09.0 Inland Marine/09.0005 Other Commercial Inland Marine		
<b>Product Name:</b>	Commercial Inland Marine		
<b>Project Name/Number:</b>	CM 06380/CM DC06380CCF01		

## Supporting Document Schedules

<b>Bypassed - Item:</b>	Readability Certificate
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	APPROVED
<b>Status Date:</b>	05/08/2018

<b>Bypassed - Item:</b>	Copy of Trust Agreement
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	APPROVED
<b>Status Date:</b>	05/08/2018

<b>Bypassed - Item:</b>	Expedited SERFF Filing Transmittal Form
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	APPROVED
<b>Status Date:</b>	05/08/2018

<b>Bypassed - Item:</b>	Consulting Authorization
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	APPROVED
<b>Status Date:</b>	05/08/2018